Frequently Asked Questions

If I am happy with my benefits as they are now, do I have to do anything?  **YES!**

All full-time employees in a benefit eligible position who wish to have benefits in 2014 must enroll between 10/14 and 11/8/13, by logging on to our online enrollment system at:
https://www.benefitsolver.com

Why do I have to enroll, if I’m happy with my benefits?
Enrollment is required this year because the College is ending its self-funded medical plan as of 12/31/13.

**Annual Enrollment/Open Enrollment**

What’s the difference between annual and open enrollment?
Annual enrollment generally means no significant changes are being made to your benefits and they can therefore be “rolled” forward to the new Plan year.

Open enrollment often means significant changes are being made to your benefits and you need to make a decision as to the benefit(s) you want to enroll in for the new Plan year.

Which will we have this year - annual or open enrollment?
Open Enrollment because significant changes are being in the benefits being offered for 2014.

When is Open Enrollment?
Open Enrollment will begin on October 14th and end on November 8th

What do I have to do?
You must select the benefits you want in 2014, during the Open Enrollment period.

How do I select the benefits that I want in 2014?
Log on to BenefitSolver our online enrollment system, to select your 2014 benefits.

What is the BenefitSolver website address?
The BenefitSolver website address is: https://www.benefitsolver.com or BenefitSolver - Sign On Use the login and password that you previously created.

What if I forgot my BenefitSolver login and or password?
If you have forgotten your BenefitSolver login, call 386/506 – 3083, or – 3394, or – 3082
If you have forgotten your BenefitSolver password – click on “Forgot your Password?”

What do I do once I log on to BenefitSolver?
Once you have logged in, click on the green **Start Here** button on the right side of the screen.

What happens if I do not go into BenefitSolver and make a selection during the Open Enrollment?
You will not have medical coverage through DSC in 2014, if you do not select one of the two new medical plans being offered during the open enrollment time frame because your current medical coverage ends on 12/31/2013.
If I do not select one of the two new medical plans being offered during the open enrollment time frame when will I be able to make a select?

If you do not select one of the two new medical plans being offered during open enrollment, you will be able to enroll next year’s enrollment for coverage beginning January 1, 2015.

Medical Plan Changes

What are the health plan changes?
The College’s self-funded medical plan is closing on 12/31/13 and we are moving to the Florida College System Risk Management Consortium (Consortium), under which you will have two medical plan options, 1/1/14.

What are the two medical plan options that I will have under the Consortium?
Under the Consortium’s medical plan, you may choose either Florida Blue's PPO plan or Florida Health Care's HMO plan.

When do the benefit changes begin?
The benefit changes begin on January 1, 2014.

How can I find out more about the two plans?
To find out more about the two plans, you may attend one of the informational sessions, log on to benefits.daytonastate.edu or you may call the special enrollment hot line # at (800) 967-8938 (Please call the number on the back of your ID card after January 1st, 2014).

How can I find out if my doctor(s) is in either of the two plans being offered?
To see if your current doctor(s) is in the plans being offered, check the Plan's Provider Directory. FloridaBlue Provider Directory FHCP Provider Search or FHCP Provider Listing

What does "closed panel" under FHC’s HMO plan mean and how might this apply to me?
Think of a “panel” as the doctor’s patient list. Each patient list is limited to a certain number of FHCP HMO patients. If your doctor is already seeing the maximum number of FHCP HMO patients then their list is full and it is said that they have a "closed panel".

Therefore, even if you are a current patient under the College’s PPO plan, as a new FHCP HMO member, your doctor may not be able to see until they have an opening in their panel.

If I am already seeing a specific doctor, why would I be considered a "new" patient?
You are considered a "new" patient because you have new medical insurance coverage.

If I am already seeing a specific doctor and they have a “closed panel” what can I do?
You can ask your doctor if they would be willing to add you to their panel. If your doctor says yes, they will need to contact FHCP and request that you be assigned to their panel. If your doctor is not able to add you to their panel, you would need to select a doctor whose panel is open.

Does the “closed panel” apply to the Florida Blue PPO plan?
No, the “closed panel” does not apply to Florida Blue’s PPO plan. However, some doctors may not be accepting new patients and or may not accept Florida Blue’s PPO - Blue Options plan.

Will I get a new medical ID card?
Yes, new medical ID cards will be mailed to the home address shown in the BenefitSolver Employee Profile. Cards will only be sent to employees/members who complete their Open Enrollment and select a medical plan.

*When will I receive my new medical ID card?*

For those employees who log on to BenefitSolver during Open Enrollment and select a medical plan, new medical ID cards will be mailed to their homes during the month of December.

*Who do I call if I completed my enrollment on BenefitSolver during the Open Enrollment time frame, but I do not receive my new medical ID card in December?*

If you enrolled in FL Blue's PPO plan and you do not receive your new medical ID card in December, call: (800) 255-4908

If you enrolled in FHCP's HMO plan and you do not receive your new medical ID card in December, call: (386) 615-4022
Dental and Vision Plans

What changes are coming in 2014 relative to the dental and vision plans?
There are no coverage changes to the dental and vision plans in 2014.

Where will I submit my dental and vision claims?
Dental and vision claims will still be submitted to FMH in 2014.

Do I have to re-enroll if I am already enrolled in the dental and or vision plans?
Yes, during the Open Enrollment period, you will need to enroll in all plans you wish to have in 2014, including dental and vision.

If I do not need the medical coverage provided by the College, can I still enroll in the dental and or the vision plan?
Yes, the medical, dental and vision plans are all separate plan options -- meaning you can enroll in one, two or all three of the plans.

How can I find out what dentists take our insurance?
Our dental plan is open to all dentists in the Volusia/Flagler County area, you may go to any dentist you would like.

Will I be getting dental and or vision ID card?
Yes, new dental and or vision ID cards will be mailed to the homes of all employees who log on to BenefitSolver during Open Enrollment and enroll in the plan(s).

When will I receive my new dental and or vision ID card?
For those employees who log on to BenefitSolver during Open Enrollment and enroll in the dental and or vision plan(s), new ID cards will be mailed to their homes during the month of December.

Who do I call if I completed my enrollment on BenefitSolver during the Open Enrollment time frame, but I do not receive my new dental and or vision ID card in December?
If you enrolled in the dental and or vision plan(s) and you do not receive your new ID card in December, call FMH at 866/500-5048.

What is BenefitSolver?
BenefitSolver is our online enrollment system.

What is the BenefitSolver website address?
The BenefitSolver website address is: https://www.benefitsolver.com or BenefitSolver - Sign On
Use the login and password that you previously created.

What if I forgot my BenefitSolver login and or password?
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What happens if I do not go into BenefitSolver and enroll during the Open Enrollment?
If you do not enroll during the open enrollment time frame, you will not have dental and or vision coverage in 2014.
Flexible Spending Accounts (Flex Plans)

**What changes are coming in 2014 relative to our Flexible Spending Accounts (FSA)?**
The only change coming in 2014 relative to the FSA plans pertains to the medical reimbursement. FMH will continue making FSA reimbursements and payments via the Benny cards, however, the automatic or "sweep" option ends on 12/31/13 with the end of the College’s self-funded medical plan.

**How will my medical claims be reimbursed?**
Medical claims may be reimbursed by using the Benny card or submitting paper claims to FMH.

**What is the “Benny” Card?**
The Benny card is a Master card, which can be used instead of submitting paper claims for reimbursement.

**How does the Benny card work?**
The Benny card works like a credit or debit card with your limit being the amount that you "pledge" during Open Enrollment.

**When can I use the Benny card?**
The Benny card is best used for dollar amounts you know you are responsible for, such as your co-pays, co-insurance amounts and deductibles. The Benny card cannot be used for amounts the insurance pays or for non-healthcare expenses.

**How do I get a Benny card?**
When you enroll in the FSA plans, if you wish to receive a Benny card, simply select the Benny card option and one will be mailed to your home address.

**If I already have a Benny card, is it still good?**
Benny cards have an expiration date on them and remain valid through that date.

**Why won’t my Benny card work?**
Until the Benny card expires, it is still good. However, once you have spent all of the money you "pledged" during the enrollment period, the card will decline new charges.

**Can I add more money to my FSA plans during the year, if I run out?**
The IRS will not allow additional funds to be added to the FSA plans during the year if you underestimate your expenses.

**What happens to the money I "pledge" to my FSA plans if I do not use it all?**
While most employees do use all of the funds they "pledge", occasionally there are funds remaining in the account. These remaining funds are used to pay for the administration of the FSA plans. The IRS will not allow the remaining funds to be returned.

**Do I have to re-enroll, if I am already enrolled in the FSA plans?**
Yes, during the Open Enrollment period, you will need to enroll in all plans you wish to have in 2014, including FSA plans.

**How do enroll?**
To enroll, log on to BenefitSolver our online enrollment system.
**What is the BenefitSolver website address?**

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**What do I do once I log on to BenefitSolver?**

Focus Group – See attached document

**What happens if I do not go into BenefitSolver and enroll during the Open Enrollment?**

If you do not enroll during the open enrollment time frame, you will not have an FSA in 2014.